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MCDONNELL AIRCRAFT COMPANY

Box 516, Saint Louis, Missouri 63166 (314) 232-0232

04 December 1981

U.S. Environmental Protection Agency
Region VII
P.O. Box 15606
Kansas City, Missouri 64106

Attention: Mr. James L. Foil, P.E.

Reference: (a) EPA Letter from J. L. Foil to J. C.
Patterson dated 26 October 1981
(b) EPA ID No.: MOD 000818963

Enclosure: (1) Revised EPA Forms 8700-12 and 3510-3

REGISTERED MAIL - RETURN RECEIPT

Dear Mr. Foil:

Enclosed you will find our revised forms as requested
in Reference (a).

If you have any questions, please contact us.

Sincerely yours,

MCDONNELL AIRCRAFT COMPANY



Jerome Patterson
Section Manager
Plant Environment
Dept. 191C, Bldg. 102

JCP:bem

MCDONNELL DOUGLAS



R00144143
RCRA RECORDS CENTER

U.S. ENVIRONMENTAL PROTECTION AGENCY
NOTIFICATION OF HAZARDOUS WASTE ACTIVITYINSTALLATION'S EPA
I.D. NO.I. NAME OF IN-
STALLATIONII. INSTALLATION
MAILING
ADDRESSIII. LOCATION
OF INSTAL-
LATION

PLEASE PLACE LABEL IN THIS SPACE

INSTRUCTIONS: If you received a preprinted label, affix it in the space at left. If any of the information on the label is incorrect, draw a line through it and supply the correct information in the appropriate section below. If the label is complete and correct, leave Items I, II, and III below blank. If you did not receive a preprinted label, complete all items. "Installation" means a single site where hazardous waste is generated, treated, stored and/or disposed of, or a transporter's principal place of business. Please refer to the INSTRUCTIONS FOR FILING NOTIFICATION before completing this form. The information requested herein is required by law (Section 3010 of the Resource Conservation and Recovery Act).

FOR OFFICIAL USE ONLY

COMMENTS

INSTALLATION'S EPA I.D. NUMBER

APPROVED

DATE RECEIVED
(yr., mo., & day)

F M O D 0 0 0 8 1 8 9 6 3

T/A C

8 1 1 2 1 0

I. NAME OF INSTALLATION

M C D O N N E L L D O U G L A S C O R P - S T L O U I S T R A C T I

II. INSTALLATION MAILING ADDRESS

STREET OR P.O. BOX

3 P . O . B O X 5 1 6

CITY OR TOWN

ST.

ZIP CODE

4 S T . L O U I S M O 6 3 1 6 6

III. LOCATION OF INSTALLATION

STREET OR ROUTE NUMBER

5 M C D O N N E L L B L V D & L I N D B E R G H T R A C T I

CITY OR TOWN

ST.

ZIP CODE

6 S T . L O U I S M O 6 3 1 4 5

IV. INSTALLATION CONTACT

NAME AND TITLE (last, first, & job title)

PHONE NO. (area code & no.)

2 P A T T E R S O N J E R O M E S E C T I O N M G R .

3 1 4 - 2 3 2 - 3 3 1 9

V. OWNERSHIP

A. NAME OF INSTALLATION'S LEGAL OWNER

8 M C D O N N E L L D O U G L A S C O R P . A N D U . S . G O V ' T

B. TYPE OF OWNERSHIP
(enter the appropriate letter into box)

VI. TYPE OF HAZARDOUS WASTE ACTIVITY (enter "X" in the appropriate box(es))

F = FEDERAL
M = NON-FEDERAL

F&M

☒ A. GENERATION☒ B. TRANSPORTATION (complete item VII)☒ C. TREAT/STORE/DISPOSE☐ D. UNDERGROUND INJECTION

VII. MODE OF TRANSPORTATION (transporters only - enter "X" in the appropriate box(es))

☐

A. AIR

☐

B. RAIL

☒

C. HIGHWAY

☐

D. WATER

☐

E. OTHER (specify):

VIII. FIRST OR SUBSEQUENT NOTIFICATION

Mark "X" in the appropriate box to indicate whether this is your installation's first notification of hazardous waste activity or a subsequent notification. If this is not your first notification, enter your Installation's EPA I.D. Number in the space provided below.

☐

A. FIRST NOTIFICATION

☒

B. SUBSEQUENT NOTIFICATION (complete item C)

C. INSTALLATION'S EPA I.D. NO.

M O D 0 0 0 8 1 8 9 6 3

IX. DESCRIPTION OF HAZARDOUS WASTES

Please go to the reverse of this form and provide the requested information.

A. HAZARDOUS WASTES FROM NON-SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from non-specific sources your installation handles. Use additional sheets if necessary.

[illegible]


	13		14		15		16		17		18
	23 - 26		23 - 26		23 - 26		23 - 26		23 - 26		23 - 26
	19		20		21		22		23		24
	23 - 26		23 - 26		23 - 26		23 - 26		23 - 26		23 - 26
	25		26		27		28		29		30
	23 - 26		23 - 26		23 - 26		23 - 26		23 - 26		23 - 26

	31		32		33		34		35		36
	[] [] []		[] [] []		[] [] []		[] [] []		[] [] []		[] [] []
	23 - 26		23 - 26		23 - 26		23 - 26		23 - 26		23 - 26
	37		38		39		40		41		42
	[] [] []		[] [] []		[] [] []		[] [] []		[] [] []		[] [] []
	23 - 26		23 - 26		23 - 26		23 - 26		23 - 26		23 - 26
	43		44		45		46		47		48
	[] [] []		[] [] []		[] [] []		[] [] []		[] [] []		[] [] []
	23 - 26		23 - 26		23 - 26		23 - 26		23 - 26		23 - 26

[illegible]

~~EX~~ 4. TOXIC
(D000)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

SIGNATURE 

R. D. Singleton
Director, Plant Engineering

7 DEC. 1981

CONTINUE ON REVERSE

III. PROCESSES (continued)

C. SPACE FOR ADDITIONAL PROCESS CODES OR FOR DESCRIBING OTHER PROCESSES (code "T04"). FOR EACH PROCESS ENTERED HERE INCLUDE DESIGN CAPACITY.

IV. DESCRIPTION OF HAZARDOUS WASTES

A. EPA HAZARDOUS WASTE NUMBER — Enter the four-digit number from 40 CFR, Subpart D for each listed hazardous waste you will handle. If you handle hazardous wastes which are not listed in 40 CFR, Subpart D, enter the four-digit number(s) from 40 CFR, Subpart C that describes the characteristics and/or the toxic contaminants of those hazardous wastes.

B. ESTIMATED ANNUAL QUANTITY — For each listed waste entered in column A estimate the quantity of that waste that will be handled on an annual basis. For each characteristic or toxic contaminant entered in column A estimate the total annual quantity of all the non-listed waste(s) that will be handled which possess that characteristic or contaminant.

C. UNIT OF MEASURE — For each quantity entered in column B enter the unit of measure code. Units of measure which must be used and the appropriate codes are:

ENGLISH UNIT OF MEASURE **CODE**
 POUNDS. P
 TONS. T

METRIC UNIT OF MEASURE **CODE**
 KILOGRAMS. K
 METRIC TONS. M

If facility records use any other unit of measure for quantity, the units of measure must be converted into one of the required units of measure taking into account the appropriate density or specific gravity of the waste.

D. PROCESSES**1. PROCESS CODES:**

For listed hazardous waste: For each listed hazardous waste entered in column A select the code(s) from the list of process codes contained in Item III to indicate how the waste will be stored, treated, and/or disposed of at the facility.

For non-listed hazardous wastes: For each characteristic or toxic contaminant entered in column A, select the code(s) from the list of process codes contained in Item III to indicate all the processes that will be used to store, treat, and/or dispose of all the non-listed hazardous wastes that possess that characteristic or toxic contaminant.

Note: Four spaces are provided for entering process codes. If more are needed: (1) Enter the first three as described above; (2) Enter "000" in the extreme right box of Item IV-D(1); and (3) Enter in the space provided on page 4, the line number and the additional code(s).

2. PROCESS DESCRIPTION: If a code is not listed for a process that will be used, describe the process in the space provided on the form.

NOTE: HAZARDOUS WASTES DESCRIBED BY MORE THAN ONE EPA HAZARDOUS WASTE NUMBER — Hazardous wastes that can be described by more than one EPA Hazardous Waste Number shall be described on the form as follows:

1. Select one of the EPA Hazardous Waste Numbers and enter it in column A. On the same line complete columns B, C, and D by estimating the total annual quantity of the waste and describing all the processes to be used to treat, store, and/or dispose of the waste.
2. In column A of the next line enter the other EPA Hazardous Waste Number that can be used to describe the waste. In column D(2) on that line enter "included with above" and make no other entries on that line.
3. Repeat step 2 for each other EPA Hazardous Waste Number that can be used to describe the hazardous waste.

EXAMPLE FOR COMPLETING ITEM IV (shown in line numbers X-1, X-2, X-3, and X-4 below) — A facility will treat and dispose of an estimated 900 pounds per year of chrome shavings from leather tanning and finishing operation. In addition, the facility will treat and dispose of three non-listed wastes. Two wastes are corrosive only and there will be an estimated 200 pounds per year of each waste. The other waste is corrosive and ignitable and there will be an estimated 100 pounds per year of that waste. Treatment will be in an incinerator and disposal will be in a landfill.

LINE NO.	A. EPA HAZARDOUS WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES	
				1. PROCESS CODES (enter)	2. PROCESS DESCRIPTION (if a code is not entered in D(1))
X-1	K 0 5 4	900	P	T 0 3 D 8 0	
X-2	D 0 0 2	400	P	T 0 3 D 8 0	
X-3	D 0 0 1	100	P	T 0 3 D 8 0	
X-4	D 0 0 2				included with above

EPA I.D. NUMBER (enter from page 1)															FOR OFFICIAL USE ONLY									
S W M O D 0 0 0 8 1 8 9 6 3 T/A C 1															S W D U P T/A C 2 D U P									
1 2 13 14 15															1 2 13 14 15 23 24 25									
IV. DESCRIPTION OF HAZARDOUS WASTES (continued)																								
LINE NO.	A. EPA HAZARD. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES																				
				1. PROCESS CODES (enter)								2. PROCESS DESCRIPTION (if a code is not entered in D(1))												
1	D 0 0 1	520	T	S 0 1																				
2	D 0 0 2																							Included with Line 1
3	D 0 0 3																							Included with Line 1
4	D 0 0 6																							Included with Line 1
5	D 0 0 7																							Included with Line 1
6	F 0 0 1																							Included with Line 1
7	F 0 0 2																							Included with Line 1
8	F 0 0 3																							Included with Line 1
9	F 0 0 5																							Included with Line 1
10	F 0 0 6																							Included with Line 1
11	F 0 0 7																							Included with Line 1
12	F 0 0 8																							Included with Line 1
13	F 0 0 9																							Included with Line 1
14	F 0 1 1																							Included with Line 1
15	F 0 1 9																							Included with Line 1
16	D 0 0 2	1,542	T	S 0 2																				
17	D 0 0 3																							Included with Line 16
18	D 0 0 7																							Included with Line 16
19	D 0 0 2	139	T	S 0 2																				
20	D 0 0 3																							Included with Line 19
21	D 0 0 2	555	T	S 0 2																				
22	D 0 0 3																							Included with Line 21
23	D 0 0 1	150	T	S 0 2																				
24	D 0 0 1	7	T	S 0 2																				
25	D 0 0 1	3	T	S 0 2																				
26	D 0 0 1	34	T	S 0 2																				

IV. DESCRIPTION OF HAZARDOUS WASTE (continued)

E. USE THIS SPACE TO LIST ADDITIONAL PROCESS CODES FROM ITEM D(1) ON PAGE 3.

EPA I.D. NO. (enter from page 1)															
8	F	M	0	D	0	0	0	8	1	8	9	6	3	T/A	C
1	2														6
														13	14

V. FACILITY DRAWING

All existing facilities must include in the space provided on page 5 a scale drawing of the facility (see instructions for more detail).

VI. PHOTOGRAPHS

All existing facilities must include photographs (aerial or ground-level) that clearly delineate all existing structures; existing storage, treatment and disposal areas; and sites of future storage, treatment or disposal areas (see instructions for more detail).

VII. FACILITY GEOGRAPHIC LOCATION

LATITUDE (degrees, minutes, & seconds)										LONGITUDE (degrees, minutes, & seconds)																
			3	8			4	5			3	0	0			0	9	0			2	2		1	0	0
			85	66			67	68			69	-	71			72	-	74			75	76		77	-	79

VIII. FACILITY OWNER

- ☒ A. If the facility owner is also the facility operator as listed in Section VIII on Form 1, "General Information", place an "X" in the box to the left and skip to Section IX below.
- B. If the facility owner is not the facility operator as listed in Section VIII on Form 1, complete the following items:

1. NAME OF FACILITY'S LEGAL OWNER															2. PHONE NO. (area code & no.)																			
3. STREET OR P.O. BOX															4. CITY OR TOWN										5. ST.					6. ZIP CODE				

IX. OWNER CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME (print or type)	B. SIGNATURE	C. DATE SIGNED
Donald Malvern		7 Dec 1981

X. OPERATOR CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

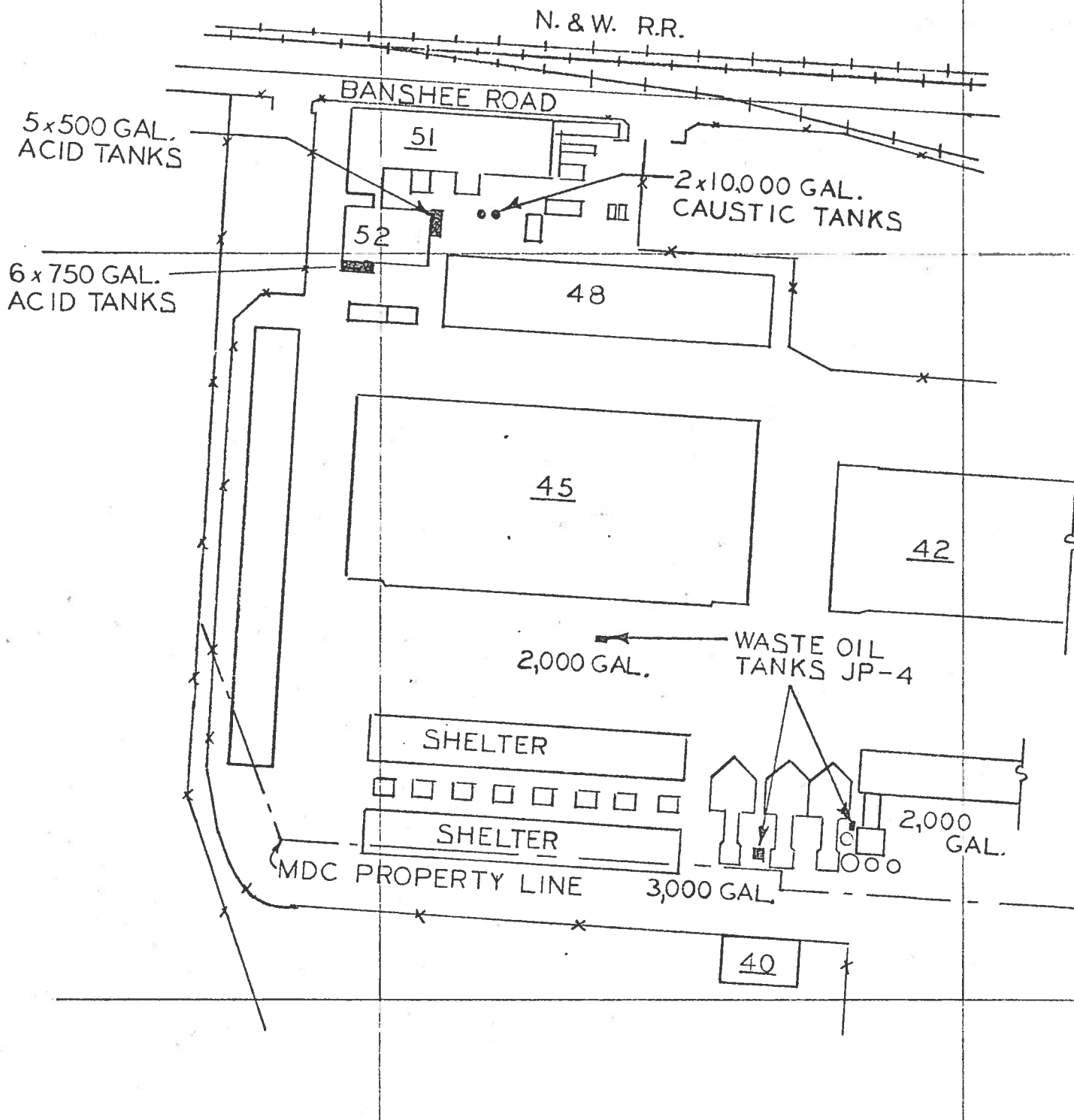
A. NAME (print or type)	B. SIGNATURE	C. DATE SIGNED
Robert D. Singleton		7 DEC. 1981


EPA I.D. NUMBER (enter from page 1)															FOR OFFICIAL USE																																																														
W M O D 0 0 0 8 1 8 9 6 3															DUP																																																														
IV. DESCRIPTION OF HAZARDOUS WASTES (continued)																																																																													
LINE NO.	A. EPA HAZARD. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES																																																																									
				1. PROCESS CODES (enter)																2. PROCESS DESCRIPTION (if a code is not entered in D(1))																																																									
23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42		43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99
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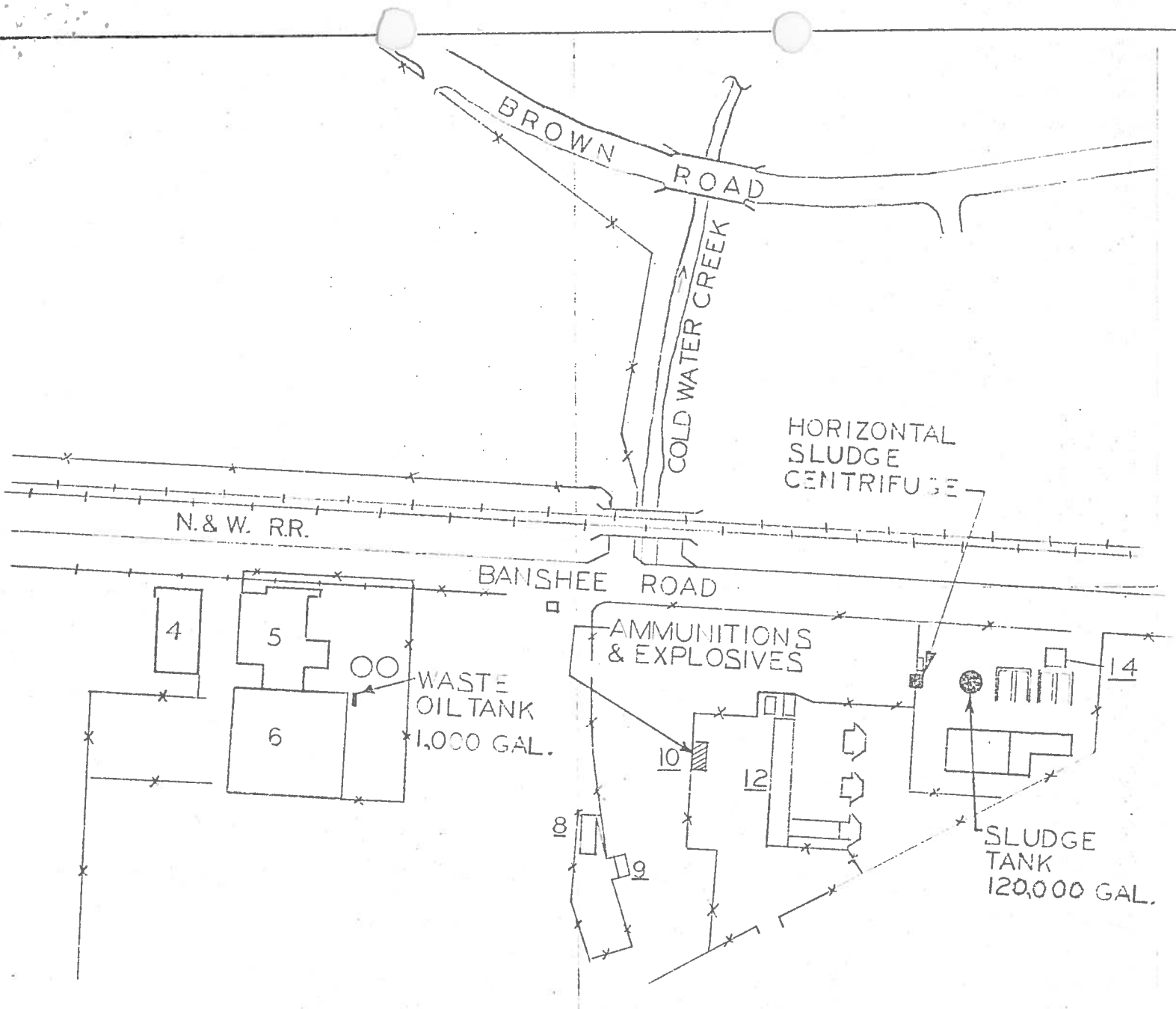
V. FACILITY DRAWING (see page 4)

See attached Drawings

SKPE 1280 Sheets 2, 3, 4



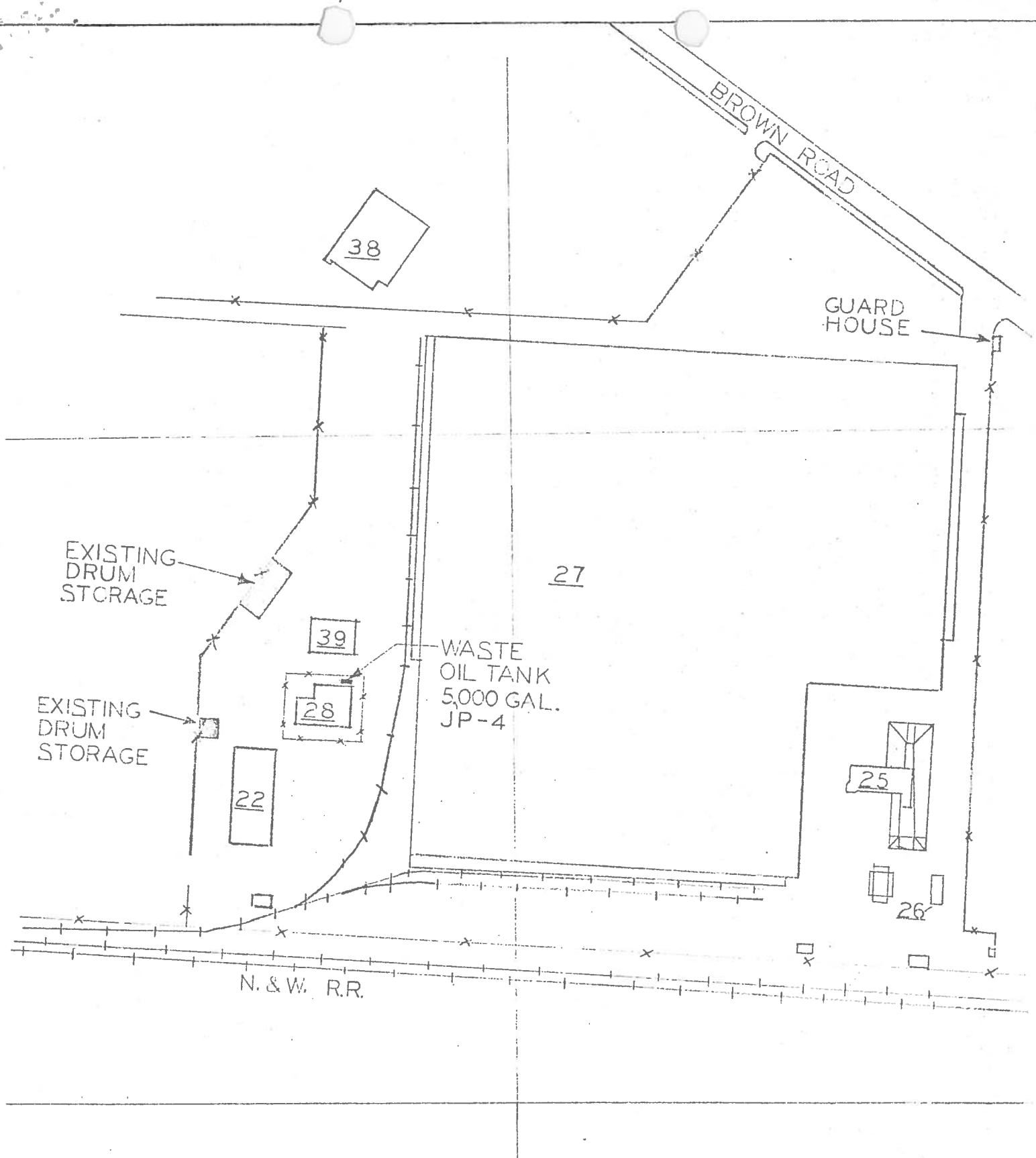
SCALE	1" = 200'	HAZARDOUS WASTES STORAGE AREA	P.O. Box 516 Saint Louis, Missouri 63166
DRAWN	D.L.H. 11/14/80	MDC BLDG. 45	 MCDONNELL DOUGLAS CORPORATION
APPROVED	<i>[Signature]</i> 11/14/80	SITE PLAN	
APPROVED	<i>[Signature]</i> 11/14/80	APPROVED FOR CONSTRUCTION	PLANT ENGINEERING
D.R.	F.O.P.	BY _____	CKDF 1200 [Stamp]



SCALE	1" = 200'	
DRAWN	D.L.H.	11/14/80
APPROVED	<i>[Signature]</i>	11/14/80
APPROVED	<i>[Signature]</i>	11/14/80
F.O.R.	F.O.	

HAZARDOUS WASTES STORAGE AREA	
MDC. BLDG. 6	
SITE PLAN	
APPROVED FOR CONSTRUCTION	
BY	

P.O. Box 516 Saint Louis, Missouri 63188
MCDONNELL DOUGLAS
CORPORATION
PLANT ENGINEERING
CLD 1000



SCALE	1" = 200'	
DRAWN	D.L.H.	11/14/83
APPROVED	<i>[Signature]</i>	12/10/83
APPROVED	<i>[Signature]</i>	11-18-83
E.O.R.	F.O.	

HAZARDOUS WASTES STORAGE AREA
MD.C. BLDG. 27
SITE PLAN

APPROVED FOR CONSTRUCTION

BY _____

P.O. Box 516 Saint Louis, Missouri 63166

MCDONNELL DOUGLAS CORPORATION

PLANT ENGINEERING

CKDF 1200

SH